

**LOUISIANA OFFICE OF FINANCIAL INSTITUTIONS
SECURITIES DIVISION
COMPLAINT FORM**

NAME AND ADDRESS OF FIRM OR PERSON COMPLAINT IS AGAINST:

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____ Email: _____

YOUR NAME AND ADDRESS:

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____ Email: _____

TYPE OF COMPLAINT:

Complaint against a Company or Firm ☐

Complaint against an Individual ☐

Other, please specify: _____

Date of Transaction: _____

Place of Transaction (Specify the States in which you and the salesman were located)

Witnesses to the Transaction: _____

State the type of investment involved (e.g. stock, note, limited partnership, etc. If you are not certain, describe on last page.) _____

- If you invested in stock or a bond, what was the name of the issuing corporation? _____
- If you invested in a note, who was the maker (Company or Individual) responsible for paying it? _____
- If you invested in a partnership, what was the name of that partnership? _____
- Other: _____

Amount involved in transaction: _____

Do you have and can you provide evidence of investment (front and back of checks; cashiers checks; money orders; etc.)? NO ☐ YES ☐

Did you sign any papers or documents? NO ☐ YES ☐ (If Yes, please attach copies of them.)

How did you first learn about this investment? _____

Have you complained to the Company or Firm? NO ☐ YES ☐ (If yes, to whom?)

What was the response? _____

May we send a copy of your complaint to the firm or individual complained against?
YES ☐ NO ☐

Does an attorney represent you in this matter? NO ☐ YES ☐

If YES, give Attorney's Name and Address:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Did you begin any legal action against this company? NO ☐ YES ☐
Explain _____

Are you willing to sign an affidavit or testify regarding your transaction with this
Company? NO ☐ YES ☐

Specify other governmental or regulatory agencies contacted: _____

May we send a copy of your complaint to another governmental agency or regulatory
body for review or investigation? NO ☐ YES ☐

Did you tape-record any of your conversations regarding the transaction(s)?
NO ☐ YES ☐

Names, telephone number and/or addresses of any other known investors:

[illegible]

Signature: _____ Date: _____

Louisiana Office of Financial Institutions
Securities Division
8660 United Plaza Blvd., 2nd Floor
Baton Rouge, LA 70809-7024